

PTO/SB/81 (01-06)

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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	ormation unless it displays a valid OMB control number.
Filing Date	21 April 2006
First Named Inventor	Angeline Ingrid BARTHOLOMEUSZ
Title	HBV variants detection
Art Unit	
Examiner Name	
Attorney Docket Number	19781

		Attorney Docket Number	19781	
I hereby revoke all previo	us powers of attorney give	ven in the above-identified	application	<u> </u>
I hereby appoint:				
Practitioners associated v	vith the Customer Number:	00272		
Practitioner(s) named belo	ow			- 1
	Name	R	egistration Number	
as my/our attorney(s) or agent(s Trademark Office connected the	to prosecute the application is rewith.	dentified above, and to transact a	Il business in the United States Patent and	
The address associate	d with the above-mentioned Cu			
Firm or Individual Name Address				
City		State	Zip	_
Telephone				
I am the: Applicant/Inventor. Assignee of record of the Statement under 37 CFF	e entire interest. See 37 CFR 3 3.7.73(b) is enclosed. (Form P	.71.		
MELBOURNE HEALTH		pplicant or Assignee of Record		
Signature Name DC Title and Company	PHNEELA NEDIRECTO	WATT	Date 31116 2006 Telephone 03 93 2 253 30	
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/	ms are submitted.			-

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PTO:SB/81 (01:06) Approved for use through 12/31/2006. OMB 0651-0035 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Application Number POWED OF ATTORNAY Filing Date POWER OF ATTORNEY 21 April 2005 First Named Inventor Angeline Ingrid BARTHOLOMEUSZ and Title HBV variants detection. CORRESPONDENCE ADDRESS Art Unit INDICATION FORM Examiner Name

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L. Applicant/Inve							
Assignee of n	ecord of the	he entire interest. See 37 CFR : FR 3.73(b) is enclosed. (Form P	3.71. TOMORDE				
							
AUSTIN HEALT Signature	H	SIGNATURE of A	pplicant or A	ssignos of	Record		1
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Title and Company		130ENIN	MILTO.			ephone 9	844654090
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•Total of five		orms are submitted					

Attorney Docket Number

This codection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 mirrors to complete, including gathering, propering, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the smouth of time you require to complete this form and/or suggestions for reducing this burder, should be sent to the Chief Information Officer, U.S. Parient and Trademark Office, U.S. Department of Commence, P.O. Box 1450, Alexandria, VA 22313-1450. OO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Application Number	Service Control (1981)
	Filing Date	21 April 2006
	First Named Inventor	Angeline Ingrid BARTHOLOMEUSZ
	Title	HBV variants detection
	Art Unit	
	Examiner Name	
	Attorney Docket Number	19781

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I hereby revoke all previous powers of attorney gi	ven in the above-identified a	application.
I hereby appoint:		
Precitioners associated with the Customer Number: OR	00272	
Practitioner(s) named below:		
Name	Re	egistration Number
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as my/our attorney(s) or agent(s) to prosecute the application Trademark Office connected therewith.	Identined spove, and to transact at	I business in the United States Palent and
Please recognize or change the correspondence address for the address associated with the above-mentioned Correspondence address associated with Customer Number:		
Firm or Individual Name		
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Country Telephane	Email I	
I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR Statement under 37 CFR 3.73(b) is enclosed. (Form:	3.71.	
	Applicant or Assignee of Record	1
Signature []	~	Date 30/10/06
Name Text 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Lillanns Hur ganside He	Telephone 9276 2000
NOTE: Signatures of all the inventors or assignees of record of the entit signature is required, see below.		
*Total of five forms are submitted.		

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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Application Number	
	Filing Date	21 April 2006
	First Named Inventor	Angeline Ingrid BARTHOLOMEUSZ
	Title	HBV variants detection
	Art Unit	
	Examiner Name	
	Attorney Docket Number	19781

	previous powers of attorney	given in the at	ove-Identi	fied application.		
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	sociated with the Customer Number.	002	72			
OR					•	
Practitioner(s) na	amed below:					·
	Name			Registration Nur	nber	
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	nange the correspondance address t	or the above-ident	fied application	on to:		
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OR						
	associated with Customer Number:					
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Signature	1 AND EL			Date	3	11 Oct 2006
Name	/ John	55 NO (2)	L 33∙Λ	Teleph	ne //.	13) 9594274
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NOTE: Signatures of at 9 signature is required, see	he inventors or assignees of record of the below".	entire interest or the	representative	e(s) are required. Subm	il multiple	forms if more than one
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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	ALLIGHMAN GUESS & GESTINA S IN ASIN CHIE COLLICE UD LUCES
Filing Date	21 April 2006
First Named Inventor	Angeline Ingrid BARTHOLOMEUSZ
Title	HBV variants detection
Art Unit	
Examiner Name	
Attorney Docket Number	19781

	Addition Dockstitement 13	
I hereby revoke all previous powers of attorney give	en in the above-identified app	fication.
I hereby appoint:		
Practitioners associated with the Customer Number:	00272	
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Practitioner(s) named below:		•
Name	Regis	tration Number
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as my/our attorney(s) or agent(s) to prosecute the application id Trademark Office connected therewith.	entified above, and to transact all bu	siness in the United States Patent and
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OR		
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I am the:		
Applicant/Inventor.		
Assignee of record of the entire interest. See 37 CFR 3	1.71.	
Statement under 37 CFR 3.73(b) is enclosed. (Form P		
ding as ST. VINCENT'S HOSPITAL MELBOURNE SIGNATURE OF A	pplicant or Assignee of Record	
Signature ACC1324 1	ic econo	Date 3 1000
Name NICOLE TEELY		Telephone 5788 3538
Title and Company (FILEF ELECTIVE OFFICE	CER STUNGAND HON	
NOTE: Signatures of all the inventors or assignees of record of the entire signature is required, see below".	interest or their representative(s) are req	uired. Submit multiple forms if more than one
*Total of five forms are submitted.		· · · · · · · · · · · · · · · · · · ·

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STATEMENT UNDER 37 CFR 3.73(b)
Applicant/Patent Owner: Angeline Ingrid BARTHOLOMEUSZ et al
Application No./Patent No./Control No.: Filed/Issue Date: 21 April 2006
Entitled: HBV variants detection and application
MELBOURNT HEALTH a
(Name of Assignee) (Type of Assignee: corporation, partnership, university, government agency, etc.) 1 the assignee of the entire right, title, and interest; or
2. an assignee of less than the entire right, title and interest (The extent (by percentage) of its ownership interest is
in the patent application/patent identified above by virtue of either:
A. An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel, Frame, or a true copy of the original assignment is attached. OR
B. A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as follows:
To: The document was recorded in the United States Patent and Trademark Office at Reel, Frame, or for which a copy thereof is attached.
2. From: To:
The document was recorded in the United States Patent and Trademark Office at Reel, Frame, or for which a copy thereof is attached.
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The document was recorded in the United States Patent and Trademark Office at Reel, Frame, or for which a copy thereof is attached.
Additional documents in the chain of title are listed on a supplemental sheet.
As required by 37 CFR 3.73(b)(1)(i), the documentary evidence of the chain of title from the original owner to the assignee was, or concurrently is being, submitted for recordation pursuant to 37 CFR 3.11. [NOTE: A separate copy. (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, to record the assignment in the records of the USPTO. See MPEP 302.08]
The undersigned (whose fille is supplied below) is authorized to act on behalf of the assignee.
DRANGELA WATT 61393423530
Printed or Typed Name Telephone Number
ACTING DIRECTOR OF RESEARCH.

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14 This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



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•	STATEMENT UNI	DER 37 CFR 3.73(b)	
Applicant/Pateril Owner: Angeline Ingrid B	ARTHOLOMEUSZ et a	<u>. </u>	
Application No./Patent No./Control No.:		Filed/Issue Date: _2	1.April 2008.
Entitled: HBV variants detection and applica	tion		
AUSTIN HEALTH		. a	
(Name of Assignee) states that it is: 1 the assignee of the entire right, title	a, and interest; or		on, parinenship, universily, government egency, etc.
2. An assignee of tess than the entire (The extent (by percentage) of its o	wnership interest is _	%)	
in the patent application/patent identified	above by virtue of eith	her:	
A. An assignment from the inventor(s) in the United States Patent and Traoriginal assignment is attached. OR B. A chain of title from the inventor(s)	demark Office at Ree	l, Frame	ove. The assignment was recorded a, or a true copy of the
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Additional documents in the cha			
As required by 37 CFR 3.73(b)(1)(i), the assignes was, or concurrently is being [NOTE: A separate copy (i.e., a true of Division in accordance with 37 C 302.08]	i, submitted for reco copy of the original as	rdation pursuant to 37	CFR 3.11
The undersigned (whose tills is supplied to	selow) is authorized to	o action behalf of the as	signee. 3//10/06
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Printed or T	yped Name	THI	Telephone Number
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STATEMENT UNDER 37 CFR 3.73(b)
Applicant/Patent Owner: Angeline Ingrid BARTHOLOMEUSZ et al
Application No./Patent No./Control No.: Filed/Issue Date: 21 April 2008
Entitled: HBV variants detection and application
BAYSIDE HEALTH
(Name of Assignee) [Type of Assignee, coloquation, partnership university pose (organization)
states that it is: 1. the assignee of the entire right, title, and interest; or
2. an assignee of less than the entire right, title and interest (The extent (by percentage) of its ownership interest is%)
in the patent application/patent identified above by virtue of either:
A. An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Real, Frame, or a true copy of the original assignment is attached.
OR B
The document was recorded in the United States Patent and Trademark Office at
Reel, Frame, or for which a copy thereof is attached.
2. From:To
The document was recorded in the United States Patent and Trademark Office at
Reel, Frame, or for which a copy thereof is attached.
3. From:
The document was recorded in the United States Patent and Trademark Office at
Reel, Frame, or for which a copy thereof is attached.
Additional documents in the chain of title are listed on a supplemental sheet.
As required by 37 CFR 3.73(b)(1)(i), the documentary evidence of the chain of title from the original owner to the assignee was, or concurrently is being, submitted for recordation pursuant to 37 CFR 3.11. [NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, to record the assignment in the records of the USPTO. See MPEP 302.08]
The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.
Signature Jennifer Williams Printed or Typed Name Chief Executive Title
Printed or Typed Name Telephone Number
Chief Executive.
Title

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to fide (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time year require to complete this form another suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patern and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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STATEMENT UNDER 37 CFR 3.73(b)
Applicant/Patent Owner: Angelina Inorid BARTHOLOMEUSZ et al
Application No./Patent No./Control No.: Filed/Issue Date: _21 April 2008.
Entitled: HBV variants detection and application
SOUTHERN HEALTH . 8 Statutory corporation (Name of Assignee) (Type of Assignee) corporation, bardnership, university, covernment spency etc.)
states that it is:
1. The assignee of the entire right, title, and interest; or
2. An assignee of less than the entire right, title and interest (The extent (by percentage) of its ownership interest is%)
in the patent application/patent identified above by virtue of either:
A. An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel, Frame, or a true copy of the
original assignment is attached. OR B A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as follows:
From: To: The document was recorded in the United States Palent and Trademark Office at
The document was recorded in the United States Palent and Trademark Office at Reel, Frame, or for which a copy thereof is attached.
The document was recorded in the United States Patent and Trademark Office at
Reel, Frame, or for which a copy thereof is attached.
3. From:
Reel, Frame, or for which a copy thereof is attached.
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The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.
10/10 Signature Date (613) 95942742
Printed or Typed Name Comorate Councel Telephone Number
Title

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	HBV variants detection and application	
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This collection of information is required by 37 CFR 3.73[b]. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1 11 and 114. This collection is estimated to take 12 minutes to complete, including gallering, preparing, and submitting the completed application form to the USPTO. Tame will vary depending upon the individual case. Any U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA. 22313-1450.

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